

PTO/SB/01 (10-00)
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DECLARATION AND POWER OF ATTORNEY			Attorney Docket Nu	ımber	PPC-783		
			First Named Inventor Herve Buzot				
FOR UTILITY OR DESIGN			COMPLETE IF KNOWN				
PATENT APPLICATION (37 CFR 1.63) Declaration Submitted with Declaration Submitted after Initial Filing OR Initial Filing (Surcharge)		Application Number TBD		TBD			
			Filing Date				
(37 CFR 1.16(e)) required)			Group Art Unit				
	Examiner Name						
As a below named invento	r, I hereby declare that:						
My residence, mailing address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:							
F	ABSORBENT DEVICE FO	OR INSERT		AL CAVIT	·Y		
the specification of which							
is attached hereto							
OR							
was filed on (MM/DD/YYYY) as United States Application Number or PCT International Application Number and was amended on (MM/DD/YYYY)							
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.							
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.							
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.							
Prior Foreign	Count			riority	Certified Copy		
Application Number(s)	Country	(MM/DE	D/YYYY) Not	Claimed	Attached? YES NO		
Additional foreign applic	ation numbers are listed o	on a sunnle	emental priority data s	Sheet PTC	D/SB/02B attached hereto:		

DECLARATION - Utility or Design Patent Application						
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.						
Application Number(s)	Filing Date (MM/DD/YYYY)	Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.				
as the subject matter of each of the claims provided by the first paragraph of Title 35, defined in Title 37, Code of Federal Regula national or PCT international filing date of	T	or United States application in the manner ne duty to disclose material information as a filing date of the prior application and the				
Application Serial No.	Filing Date	Status				
		Patented Patented Patented				
I hereby appoint:						
Practitioners at Customer Number AND	000027777 .	Place Customer Number Bar Code Label Here				
Practitioner(s) named below: Name Registration Number						
as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.						
Address all telephone calls to Joel A. Rothfus at telephone number (732) 524-2/22.						
Customer Number Direct all correspondence to:						
Name:						
Address:						
Address:						
City:	State:	ZIP				
Country	Telephone:	Fax:				

information and belief are believed to be that willful false statements and the like U.S.C. 1001 and that such willful false sissued thereon.	e true; and further so made are pun	that these statishable by fine	atements were e or imprisonme	ent, or both, under 18	
NAME OF SOLE OR FIRST INVENTOR:	□Аре	etition has been fi	led for this unsign	ed inventor	
Given Name (first and middle [if any]) Herve		Family Name or Surname	Buzot		
Inventor's Signature			Date		
Residence: City North Brunswick	State NJ	Coun	try USA	Citizenship French	
Mailing Address 999 Hidden Lake Drive					
City North Brunswick	State NJ	ZIP ()8902	Country USA	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.					
NAME OF SECOND INVENTOR:	□Аре	etition has been fi	led for this unsign	ed inventor	
Given Name (first and middle [if any]) Family Name or Surname					
Inventor's Part on 19, 2001 Signature Date					
			Date		
	State	Count		Citizenship	
Signature	State	Count			
Signature Residence: City	State	Count			
Signature Residence: City Mailing Address	State de herein of my or e true; and further so made are pun	ZIP wn knowledge that these sta ishable by fine	are true and the	Country nat all statements made on made with the knowledge ent, or both, under 18	
Residence: City Mailing Address City I hereby declare that all statements madinformation and belief are believed to be that willful false statements and the like U.S.C. 100 i and that such willful false s	State de herein of my ore true; and further so made are punitatements may je	ZIP wn knowledge that these sta ishable by fine opardize the v	are true and the	Country nat all statements made on made with the knowledge ent, or both, under 18 oplication or any patent	
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Residence: City Mailing Address City I hereby declare that all statements madinformation and belief are believed to be that willful false statements and the like U.S.C. 1001 and that such willful false sissued thereon. NAME OF THIRD INVENTOR:	State de herein of my ore true; and further so made are punitatements may je	ZIP why knowledge that these statishable by fine opardize the vertition has been fill Family Name	are true and the stements were to imprisonme validity of the approximation of the approximati	Country nat all statements made on made with the knowledge ent, or both, under 18 oplication or any patent	
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DECLARATION AND POWER OF ATTORNEY			Attorney Do	cket Number	PPC-783	
					Herve Buzot	
FOR UTILITY OR DESIGN		COMPLETE IF KNOWN				
PATENT APPLICATION (37 CFR 1.63) Declaration Submitted with Declaration Submitted after Initial Filing OR Initial Filing (Surcharge		Application	Number	TBD		
	OR Initial Filing (St	(Surcharge	Filing Date			
(37 CFR 1.16(e)) required)		Group Art U	Init			
			Examiner N	ame		
As a below named invento	As a below named inventor, I hereby declare that:					
I believe I am the original, fir	My residence, mailing address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:					
,	ABSORBENT DEVICE I	FOR INSERT		VAGINAL CAV	ITY	
the specification of which						
is attached hereto						
OR .						
was filed on (MM/DD/YYYY) as United States Application Number or PCT International Application Number and was amended on (MM/DD/YYYY)						
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.						
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.						
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.						
Prior Foreign Application Number(s)	Country		Filing Date D/YYYY)	Priority Not Claime		y 10
	ation numbers are liste	d on a supple	emental priori	U data sheet P	O/SB/02B attached here	

DECLARATION - Utility or Design Patent Application						
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.						
Application Number(s)	Filing Date (MM/DD/YYYY)	prication(s) listed below.				
		Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.				
I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:						
Application Serial No.	Filing Date	Status				
		Patented Patented Patented				
I hereby appoint:						
Practitioners at Customer Number AND	Place Customer Number Bar Code Label Here					
Allo						
Practitioner(s) named below: Name Registration Number						
as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.						
Address all telephone calls to Joel A. Rothfus at telephone number (/32) 524-2722.						
Customer Number Direct all correspondence to:						
Name:						
Address:						
Address:						
City:	State:	ZIP				
Country	Telephone:	Fax:				

information and belief are believed to be that willful false statements and the like U.S.C. 1001 and that such willful false s issued thereon.	e true; and furthe so made are pur	r that these stanishable by fine	atements were e or imprisonm	made with the knowledge ent, or both, under 18
NAME OF SOLE OR FIRST INVENTOR:	☐ A p	etition has been f	iled for this unsign	ed inventor
Given Name (first and middle [if any]) Herve		Family Name or Surname	Buzot	
Inventor's Signature			Date	
Residence: City North Brunswick	State NJ	Coun	try USA	Citizenship French
Mailing Address 999 Hidden Lake Drive				
City North Brunswick	State NJ	ZIP (08902	Country USA
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.				
NAME OF SECOND INVENTOR:	Аре	etition has been fi	led for this unsign	ed inventor
Given Name Family Name (first and middle [if any]) or Surname				
Inventor's Possoy Street Date Date				in 29, 2001
Residence: City	State	Coun	try	Citizenship
Mailing Address				
City	State	ZIP		Country
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.				
NAME OF THIRD INVENTOR:	□ А ре	etition has been fi	led for this unsigne	ed inventor
Given Name (first and middle [if any])		Family Name or Surname		
Inventor's Signature		~	Date	
Residence: City	State	Count	try	Citizenship
Mailing Address				
City	State	ZIP		Country